

## CATEGORY B

### CARDIOVASCULAR

1. Cardiovascular disease may affect a driver's ability in a variety of ways. For this reason, profile guidelines and standards are shown for four of the more common circumstances. Although an individual may have more than one abnormality, the one which causes the most limitation is the one under which they should be profiled for this category. It is essential that all aspects of their condition be evaluated in an appropriate profile.
2. **GENERAL HEART DISEASE:** This profile is made for any patient having had any diagnosis of heart disease. The levels are based on the functional classification of the American Heart Association.
  - Class I.** Patients with heart disease but with no limitations of physical activity. Ordinary physical activity causes no undue dyspnea, anginal pain, fatigue or palpitation.
  - Class II.** Patients with slight limitations of physical activity. They are comfortable at rest and with mild exertion. They experience symptoms only with the more strenuous grades of ordinary activity.
  - Class III.** Patients with marked limitation of physical activity. They are comfortable at rest, but experience symptoms even with the milder forms of ordinary activity.
  - Class IV.** Patients with inability to carry on any physical activity without discomfort. Symptoms of cardiac insufficiency or of the anginal syndrome may be present, even at rest, and are intensified by activity.
3. **RHYTHM:** Patients with rhythm disturbances should not be given profile levels 2 or 3, except when the arrhythmia has been so remote and well controlled, or of such a minor nature, that the patient is expected to drive without presenting a risk to the public.
4. **AFTER MYOCARDIAL INFARCTION OR CARDIAC SURGERY:** No patient in these categories should drive until six weeks after the event or until the condition is stable, as determined by a health care professional. Because of the risk of infarction, recurrence or other cardiovascular events such as arrhythmia, after infarction or surgery, if the health care professional believes a patient has an unusually mild condition, a profile 3 may be given on his recommendation. A treadmill stress test should be repeated after six months.
5. **HYPERTENSION:** Apart from its complications, hypertension is largely an asymptomatic condition and in itself does not impair fitness to drive. Medications which may have a sedative side effect or cause unexpected orthostatic hypotension must be assessed by the health care professional as to their effect on the profile. Visual, neurological or cardiovascular complications should also be profiled under other categories. Usually, mild and stable hypertension may qualify for a profile 3 even if on medication upon recommendation of the examining health care professional.
6. Other less common cardiovascular conditions such as fistula, coarctation, cardiogenic syncope, severe peripheral arterial or venous vascular disease etc., should be profiled in a fashion comparable to those listed, based upon anticipated functional ability while driving.